

Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 9-28-13

Address: I69 SB NEAR 207MM

Incident #: 13ISPC009796

FISHERS, IN

County: HAMILTON

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence ☐ Hotel/Motel
☐ Outbuilding ☐ Open – No Structure
☒ Vehicle ☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ One Pot or Birch Reaction(s): INSIDE VEHICLE
☐ Red Phosphorous/Iodine Reaction(s): _____
☐ Hydrochloric Acid Gas Generator(s): _____
☒ Flammable Solvents: INSIDE VEHICLE
☐ Water Reactive Metal (Lithium): _____
☒ Anhydrous Ammonia: INSIDE VEHICLE
☐ Corrosive Acid: _____
☐ Corrosive Base: _____
☐ Other (item and location): _____

Vehicle Information:

Owner: HILES, RICHARD A
VIN: 1G1JC12FX47143966
Year: 2004

Make: CHEVROLET
Model: CAVALIER

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☒ No
☐ Children not present but evidence they reside or visit often

Living conditions of home: ☐ clean ☐ disarray
☐ unclean

Estimated length of time manufacturing had been occurring: 4 HOURS

Additional Information: _____

This report has been faxed* or emailed to the following agencies that serve the location:

Fire Department City, Township or County FISHERS

Fax: _____

Health Department County: HAMILTON

Fax: _____

Department of Child Services Hotline: dcshotlinereports@dcsc.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: MIKE MCCREARY Phone 317-899-8577

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.